

MAIL TO:
Office of the Attorney General
Registry of Charitable Trusts
P.O. Box 93447
Sacramento, CA 94203-4470

TELEPHONE: (916) 323-5079

WEBSITE ADDRESS:
<http://ag.ca.gov/charities/>

COMMERCIAL FUND-RAISER FOR CHARITABLE PURPOSES
VEHICLE DONATION PROGRAM

2004 2002 ANNUAL FINANCIAL REPORT
(California Government Code Section 12599)

Failure to file annual financial report by January 30 annually for each calendar year of solicitation may result in fines or filing penalties as defined in Government Code Section 12596.1.

An annual financial report must be filed for each event for each charity solicited for during the previous calendar year.



Name and Address of Commercial Fund-raiser:

513

CAR PROGRAM LLC
3755 OMEC CIRCLE #4
RANCHO CORDOVA, CA 95742

Name and Address of Charitable Organization:

CT No. 15920 F.E.I.N. No. 1475907

AIDS Research Alliance America
Neil Gordon
621-A North San Vicente Blvd.
West Hollywood, CA 90069-

City, State, and ZIP Code of Charity

CAR DONATIONS

(Type of Activity)

held (on) (from)

JANUARY 1, 20 04, to DECEMBER 31, 20 04
(Date or dates must be shown)

1.

REVENUE

- A. Car/Truck Sales
B. Boat Sales
C. Real Estate Sales
D. Other sources: (Specify)

a. _____
b. _____
c. _____
d. _____

32432.74 A.

B.

C.

Da.

Db.

Dc.

Dd.

E. TOTAL REVENUE

32432.74 E!

2. EXPENSES

- A. Fees or commissions
B. Salaries
C. Payroll taxes
D. Employee benefits
E. Towing
F. Vehicle repairs
G. Parts
H. DMV Fees
I. Appraisals
J. Detailing
K. Advertising
L. Telephone

M. Other expenses: (Specify)

a. Admin + int exp
b. _____
c. _____
d. _____

3571.98 A.

B.

C.

D.

506.03

E.

F.

G.

H.

I.

J.

K.

L.

19954.50

Ma.

Mb.

Mc.

Md.

N. TOTAL EXPENSES

24098.11 N.

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3. Distribution or net to charitable organization or charitable purposes 8334.63 3.
4. Less additional expenses relating to operation of vehicle donation program paid by charity 4
5. Total Amount charity realized from operation of vehicle donation program 8,334.63 5. ✓
6. (a) Is any officer, director, partner or owner of the Commercial Fund-raiser in any way affiliated with or control, directly or indirectly, the charitable organization for which the Commercial Fund-raiser has contracted to solicit?
☐ Yes ☒ No If "yes," complete the following:

Name of officer, director, partner or owner of commercial fund-raiser	Name and address of charitable organization	Relationship of officer, etc. to charitable organization

(b) For each affiliation identify the party of the contract between the commercial fund-raiser and the charity.

For this report, including accompanying documents, schedules and statements, correct and complete.

Tamara Reeves Member Mngt. 4-21-05
 Printed Name Title Date

Organization for verifying the distribution.

AROLAN CARLBURG EXEC DIR 4/18/05
 Printed Name Title Date

STEPHEN BROWN MEDICAL DIR 4/18/05
 Printed Name Title Date

ct-2VCF (11/2002)

RECEIVED
 APR 25 2005
 Attorney General's
 Registry of Charitable Trusts